Approved for use through 07/31/2006, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are	required to respond	to a collection of information	on unless it contains a valid	OMB control number.			
DECLARATION FOR LITTLITY OR		torney Docket Number		· · ·			
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		rst Named Inventor	Michael D	ayoub			
		COMPLETE IF KNOWN					
		oplication Number		-			
Declaration Declaration	Fil	ling Date					
Submitted OR Submitted afte With Initial Filing (surchar		t Unit					
Filing (37 ČFR 1.16 required)	(0))	kaminer Name					
I hereby declare that:				•			
Each inventor's residence, mailing address, and cit	izenship are as	stated below next to the	heir name.				
I believe the inventor(s) named below to be the orig	ninal and first inv	ventor(s) of the subject	t matter which is cla	med and for			
which a patent is sought on the invention entitled:							
Power Strip with Smoke Det	tection A	uto-Shutoff	. •	-			
	(T:4) - £45 - 1						
the specification of which	(Title of the Inv	vention)					
X is attached hereto			•				
is attached hereto							
OR	·						
was filed on (MM/DD/YYYY)		as United States Ap	plication Number or	PCT International			
Application Number and was amended on (MM/DD/YYYY) (if applicat							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information w	hich is materia	I to patentability as o	defined in 37 CFR	1.56, including for			
continuation-in-part applications, material information which became available between the filing date of the prior application							
and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent,							
inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one							
country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date							
before that of the application on which priority is claimed.							
Prior Foreign Application F Number(s) Country	oreign Filing D (MM/DD/YYYY			Copy Attached? No			
			i l 🗔				
·			┆ │ ├╣	믵			
			ļ <u> </u>	Щ			
Π Additional foreign application numbers are liste	ed on a supplem	ental priority data she	et PTO/SB/02B attac	ched hereto			

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (06-03)
Approved for use through 07/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	X Customer Number: 000038			3850	7	OR Correspondence address belo			condence address below
Name									
Address									
City				State				ZIP	
Country	Telephone		•	•	Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST IN	VENTOR:		Пар	etition	has bee	en filed	l for thi	s unsiar	ned inventor
Given Name (first and middle [if any]) Michael				F	as been filed for this unsigned inventor Family Name or Surname Dayoub				
Inventor's Signature							٠		Date 1/29/04
Residence: City	State		Country Citizer		nship				
Alpharetta	Georgia		USA	USA USA					
Mailing Address 2625 Bethany Creek Court									
City	State		ZIP			Country			
Alpharetta	Georgia			30004			USA		
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature									Date
Residence: City	State		Country		Citizenship				
Mailing Address									
City	State .		ZIP Coun		Count	ту			
Additional inventors or a legal re	presentative are bei	ng named on t	the s	uppleme	ntal shee	et(s) PTC	D/SB/02A	or 02LR a	attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are require

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

red to respond to a collection of into	imatori uniess it displays a valid OMB control flumber.
Application Number	
Filing Date	
First Named Inventor	Michael Dayoub
Title	PowerStrip with Smoke.
Art Unit	·
Examiner Name	
Attorney Docket Number	

·I hereby appoint:					
Thereby appoint.		•			
XX Practitioners associated with the Customer Number:	000038	507			
	000000	30 <i>1</i>			
OR-				**************************************	
Practitioner(s) named below:		•			
Name			Registration	Number	
·					
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above	e, and to trans	sact all business	in the United States Patent and	
Diseas recognize or change the correspondence address for	the shows ident	"Fod conlinativ	10:		
Please recognize or change the correspondence address for	the above-lucin	иней аррисан	on to.		
The address associated with the above-mentioned (Customer Numb	oer:			
OR					
				· ·	
The address associated with Customer Number:		•			
OR .					
Firm or					
Individual Name Address		I			
Address					
City		State		Tain	
Country		State		Zip	
Telephone		Fax			
I am the:		1 4 1			
XX Applicant/Inventor.		•			
Assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Name Michael Dayoub					
Signature Manager Signature					
Date 1/29/04 Telephone 770-663-8795					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
*Total of forms are submitted.					

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.